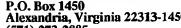
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Complete and send this form, together with applicable fee(s), to: Mail

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and I appropriate. All further correspondence including the Patent, advance orders and not indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a maintenance fee notifications.	fication of maintenance fees will be mailed to the current correspondence address as
CURRENT CORRESPONDENCE ADDRESS (Note: He Black I for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the

normoriate All further	correspondence includired below or directed oth	the Patent advance of	rders and notification of n	naintenance fees wil	il be mai	iled to the current	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
66991 7590 10/07/2008  LAW OFFICE OF MICHAEL A. SANZO, LLC 15400 CALHOUN DR. SUITE 125			State addr	rehy certify that this	Fee(s) T th suffici Stop ISS	ient postage for firs SUE FEE address	deposited with the United t class mail in an envelope above, or being facsimile	
ROCKVILLE, N	MD 20855						(Depositor's name)	
							(Signature)	
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APPLICATION NO.	FILING DATE	1	FIRST NAMED INVENTOR	1	ATTORN	EY DOCKET NO.	CONFIRMATION NO.	
10/772,089	02/05/2004		Michael R. Farzan		75	570/80968	4152	
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE			ree .		01/07/2009	
nonprovisional	YES	\$755	\$300	12/31/20	008 SDE	\$1055 ENBOB4 00000046	10772089	
EXAM	EXAMINER ART UNIT CLASS-SI		CLASS-SUBCLASS	01 FC:2			755.00 OP	
PARKIN. J		1648	530-300000	02 FC:1	504		300.00 OP	
CFR 1.363).  Change of corresp Address form PTO/SI  "Fee Address" ind	ence address or indication ondence address (or Chab/122) attached. lication (or "Fee Address or more recent) attach.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Michael A. Sanzo  Law Office of Michael A.  Sanzo, LLC						
			THE PATENT (print or typ					
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the part of a substitute for filing an	atent. If an assigned assignment.	e is iden	tified below, the de	ocument has been filed for	
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY	and STATE OR CO	DUNTRY	Y)		
_	l Women's Hospital,		Boston, Massachu				_	
Please check the appropr	riate assignee category or	r categories (will not be p	rinted on the patent):	Individual 🔀 Cor	poration	or other private gro	oup entity Government	
1a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	ase first reapply any	y previo	usly paid issue fee	shown above)	
			card. Form PTO-2038 is attached.					
Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s) any deficiency, or credit overpayment, to Deposit Account Number 50-4056 (enclose an extra copy of this					ficiency, or credit any n extra copy of this form).			
	ntus (from status indicate		☐ b. Applicant is no lon					
NOTE: The Issue Fee ar	nd Publication Fee (if req	uired) will not be accepte ates Patent and Trademark	ed from anyone other than t	he applicant; a regis	tered atte	orney or agent; or th	e assignee or other party in	
	Michael			Date Dec	emb	er 30,2	008	
Typed or printed nam	me <u>Michael A.</u>	Sanzo		Registration No	D	36,912		
This collection of inform an application. Confider submitting the complete this form and/or suggest	nation is required by 37 ( ntiality is governed by 35 ad application form to the tions for reducing this bu	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR e USPTO. Time will var irden, should be sent to the	on is required to obtain or a 1.14. This collection is est y depending upon the individual Chief Information Office	retain a benefit by the timated to take 12 m vidual case. Any con er, U.S. Patent and T	e public ninutes to nments of rademar	which is to file (and complete, including on the amount of the k Office, U.S. Dep	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents P.O. Roy, 1450.	

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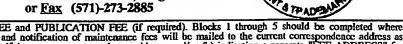
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appropriate. All further indicated unless corrects maintenance fee notifica	ed below or directed of	ng the Patent, and herwise in Block	ance orders 1, by (a) sp	ecifying a new correspond	pondence address;	and/or (b	indicating a separ	ate "FEE ADDRESS" for
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use B	lock I for any change of	address)	Fee(s	Tennemittal This	s certificat paper, su	te cannot be used for sch as an assignment	domestic mailings of the r any other accompanying t or formal drawing, must
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ROCKVILLE, N	AD 20855							(Depositor's name)
								(Signature)
								(Date)
APPLICATION NO.	FILING DATE	DATE FIRST NAMED INVEN			OR ATTORNEY DOCKET NO.			CONFIRMATION NO.
10/772.089	02/05/2004			Michael R. Farzan		75	70/80968	4152
ITILE OF INVENTION								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE D	JE PUI	BLICATION FEE DUE	PREV. PAID ISSUE	FEE T	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755		\$300	\$0		\$1055	01/07/2009
EXAM	INER	ART UNIT		CLASS-SUBCLASS				
PARKIN. J		1648		530-300000			· · · · · · · · · · · · · · · · · · ·	
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tree Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer			1) the names of up to or agents OR, alternativ 2) the name of a single egistered attorney or ag	a single firm (having as a member a ey or agent) and the names of up to int attorneys or agents. If no name is				
	ND RESIDENCE DATA							
PLEASE NOTE: Unl	ess an assignce is ident h in 37 CFR 3.11. Com	ifted below, no as pletion of this form	signee data is NOT a s	will appear on the pa substitute for filing an a	tent. If an assigne ssignment.	e is ident	tified below, the doc	cument has been filed for
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
The Brigham and	Women's Hospital,	Inc.		Boston, Massachus	ietts			
Please check the appropr	iate assignee category or	categories (will n	ot be printed	d on the patent):	Individual 🔀 Con	rporation	or other private grou	pentity Government
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s) any deficiency, or credit any overpayment, to Deposit Account Number 50-4056 (enclose an extra copy of this form					ciency, or credit any			
5. Change in Entity Sta	tns (from status indicate	d above)		orapayanaaq to Dopos		- 30-71	950 ·	
a. Applicant claim	s SMALL ENTITY state	us. See 37 CFR 1.2		b. Applicant is no long				
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United St	uired) will not be a tes Patent and Tra	accepted fro demark Off	en anyone other than th ice.	e applicant; a regis	stered atto	rney or agent; or the	assignee or other party in
Authorized Signature	mil.	A. Sanga			Date Dec	emb	v 30,20	008
Typed or printed nam	e Michael A.	Sanzo			Registration No	o	36,912	
This collection of inform	ation is required by 37 (	FR 1.311. The inf U.S.C. 122 and 3	ormation is 7 CFR 1.14	required to obtain or re . This collection is esti	etain a benefit by the mated to take 12 m	ne public v	which is to file (and complete, including	by the USPTO to process) gathering, preparing, and

an application. Confidentially is governed by 35 U.S.C. 122 and 37 CPK 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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December 30, 2008

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U.S. Patent and Trademark Office
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Randolph Building
401 Dulany Street
Alexandria, VA 22314

Re: Pay

Payment of Issue and Publication Fees

Appl. No.:

10/772,089

Filed:

February 5, 2004

Title:

Peptides Derived from Anti-HIV-1 GP120 Antibodies that Abrogate GP120 Binding

to CCR5 (as amended)

Inventor(s):

Farzan, et al.

Atty. Dkt.:

7570/80968

Sir:

The following documents are being forwarded herewith for appropriate action by the U.S. Patent and Trademark Office:

- 1. Part B Fee(s) Transmittal (in duplicate);
- 2. Change of Fee Address;
- 3. Our Check in the Amount of \$1055.00; and
- 4. Return postcard.

Our enclosed check covers the Issue Fee (\$755.00) and Publication Fee (\$300) for this application (small entity status claimed). The Director is hereby authorized to charge any fee deficiency with respect to this filing, or credit any overpayment to our Deposit Account No. 50-4056 under Order No. 7570/80968.

It is respectfully requested that the enclosed postcard be stamped with the date the enclosed documents are received by the PTO and that it be returned as soon as possible.

Very truly yours,

LAW OFFICE OF MICHAEL A. SANZO, LLC

Michael A. Sanzo Reg. No. 36,912

Attorney for Applicants

15400 Calhoun Drive • Suite 125 • Rockville, Md. 20855 Member Patent Bar and DC Bar Only Phone: (240)864-0915 • Fax: (240)597-1153 • E-mail: mike@msanzolaw.com